

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		8-15-00
O.I.P.E. CLASSIFIER		5	8-21-00
FORMALITY REVIEW		60245	10-24-00
RESPONSE FORMALITY REVIEW		20417	1-11-01

# INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral) ..... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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